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APPLICATION NO.	FILING DATE		FIRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/638,213	08/07/2003	Chris N. Contex		18	03-044-T	3317	
•	BASTROINTESTINAL LAV	AGE SYSTEM					
TITLE OF INVENTION.	ASTROUTESTITAL	, (C) = 0 1 (1 1 m)					
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APPI.N. TYPE	SMALL ENTITY	ISSUE FI	EE L	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	•	\$300	\$1000	09/06/2005	
EXAMINER		ART UNIT		LASS-SURCLASS]		
FLANAGAN, BEVERLY MEINDL		3739		600-114000	-		
CFR 1.363). (1) the t				the patent front page, I up to 3 registered pate	nt allomeys	rton R. Townsley	
Change of correspondence address (or Change of Correspondence or agents OR, Address form PTO/SB/122) attached.				-	Bela	sco Jacobs &	
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4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed.

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